

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

ADDRESS (number and street) PO BOX 52025 ISB336 PHOENIX AZ 85072

2. FEC IDENTIFICATION NUMBER C00048579 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 05 01 2008 through 05 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert S. Nichols

Signature of Treasurer Electronically Filed by Robert S. Nichols Date 06 09 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		36857.12
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	28701.99									
(c) Total Receipts (from Line 19)	6789.73	41484.60								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	35491.72	78341.72								
7. Total Disbursements (from Line 31)	9800.00	52650.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	25691.72	25691.72								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	140.00	140.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	6649.73	40539.26
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6789.73	40679.26
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6789.73	40679.26
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	720.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	85.34
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6789.73	41484.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6789.73	41484.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	40500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	3800.00	12150.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9800.00	52650.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9800.00	52650.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	6789.73	40679.26
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6789.73	40679.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	720.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	-720.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

A.	Full Name (Last, First, Middle Initial) RENEE E CASTILLO		Date of Receipt
	Mailing Address 2031 N HALL		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	MESA	AZ	85203
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.85591
		Amount of Each Receipt this Period	
		<input type="text"/> 20.00	
Name of Employer Salt River Project		Occupation MANAGER RESIDENTIAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 220.00	

B.	Full Name (Last, First, Middle Initial) BARBARA M HOFFNAGLE		Date of Receipt
	Mailing Address 1330 E LUDLOW DR		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	PHOENIX	AZ	85022
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.85699
		Amount of Each Receipt this Period	
		<input type="text"/> 20.00	
Name of Employer Salt River Project		Occupation ASSISTANT GM & CHIEF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 220.00	

C.	Full Name (Last, First, Middle Initial) DOUGLAS A HOLTON		Date of Receipt
	Mailing Address 4212 E ROCKLEDGE RD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	PHOENIX	AZ	85044
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.85704
		Amount of Each Receipt this Period	
		<input type="text"/> 20.00	
Name of Employer Salt River Project		Occupation MANAGER PRODUCT DEVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 220.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 60.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

A.	Full Name (Last, First, Middle Initial) D A PELLOUCHOUD		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address PO BOX 60400 LCD-2000		Transaction ID: SA11AI.85819
	City BOULDER CITY	State NV	Zip Code 89006
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Salt River Project	Occupation DIRECTOR PLANNING &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) MICHAEL C SHERMAN		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 13096 N 97 ST		Transaction ID: SA11AI.85866
	City SCOTTSDALE	State AZ	Zip Code 85260
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Salt River Project	Occupation MANAGER SRP TELECOM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) RUSSELL D SMOLDON		Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 28827 N 49 PL		Transaction ID: SA11AI.85877
	City CAVE CREEK	State AZ	Zip Code 85331
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Salt River Project	Occupation MANAGER STATE GOVERN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 13	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

A.

Full Name (Last, First, Middle Initial)
JOHN F SULLIVAN

Mailing Address 2533 W BARROW

City	State	Zip Code
CHANDLER	AZ	85224

FEC ID number of contributing federal political committee.

Name of Employer Salt River Project	Occupation ASSOCIATE GENERAL MA
--	------------------------------------

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	8

Transaction ID: SA11AI.85891

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

A.	Full Name (Last, First, Middle Initial) ANDY KUNASEK FOR SUPERVISOR	Transaction ID: SB29.85521 Date of Disbursement
	Mailing Address 4634 E MOUNTAINVIEW RD	<input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85028	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE/LOCAL CONTRIBUTIONS	<input type="text" value="600.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BETTY DRAKE FOR COUNCIL	Transaction ID: SB29.85526 Date of Disbursement
	Mailing Address 8003 E DEL TORNASOL	<input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City SCOTTSDALE State AZ Zip Code 85258	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE/LOCAL CONTRIBUTION	<input type="text" value="400.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAVE PEARSON, FRIENDS OF	Transaction ID: SB29.85532 Date of Disbursement
	Mailing Address P O BOX 357	<input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PEORIA State AZ Zip Code 85380	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE/LOCAL CONTRIBUTION	<input type="text" value="300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1300.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

A.	Full Name (Last, First, Middle Initial) JIM WARING, COMMITTEE TO ELECT	Transaction ID: SB29.85944 Date of Disbursement
	Mailing Address 4366 E CAMPO BELLO	<input type="text" value="05"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City PHOENIX State AZ Zip Code 85032	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE/LOCAL CANCE CK, dtd 9/19/07, Candidate Name	<input type="text" value="-500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) JOYCE CLARK FOR COUNCIL, RE-ELECT	Transaction ID: SB29.85530 Date of Disbursement
	Mailing Address 8628 W CAVALIER DRIVE	<input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City GLENDALE State AZ Zip Code 85303	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE/LOCAL CONTRIBUTION Candidate Name	<input type="text" value="400.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) MARY MONROSE, COMMITTEE TO ELECT	Transaction ID: SB29.85524 Date of Disbursement
	Mailing Address 10415 N 81ST STREET	<input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City SCOTTSDALE State Zip Code 85258	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE/LOCAL CONTRIBUTION Candidate Name	<input type="text" value="600.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

<p>A. Full Name (Last, First, Middle Initial) MARY ROSE WILCOX, COMM TO ELECT</p> <p>Mailing Address 5110 N CENTRAL STE 300</p> <p>City PHOENIX State AZ Zip Code 85012</p> <p>Purpose of Disbursement STATE/LOCAL CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.85522</p> <p>Date of Disbursement 05 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p>B. Full Name (Last, First, Middle Initial) MAX WILSON FOR SUPERVISOR</p> <p>Mailing Address P O BOX 1805</p> <p>City LITCHFIELD PARK State AZ Zip Code 85340</p> <p>Purpose of Disbursement STATE/LOCAL CONTRIBUTIONS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.85523</p> <p>Date of Disbursement 05 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p>C. Full Name (Last, First, Middle Initial) PHIL LIEBERMAN, RE-ELECT</p> <p>Mailing Address 4519 W HAYWARD</p> <p>City GLENDALE State AZ Zip Code 85301</p> <p>Purpose of Disbursement STATE/LOCAL CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.85531</p> <p>Date of Disbursement 05 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 400.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1600.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SALT RIVER VALLEY WATER USERS' ASSOCIATION POLITICAL INVOLVEMENT COMMITTEE (SRP-PIC)

A.

Full Name (Last, First, Middle Initial)

RON McCULLAGH, COMMITTEE TO ELECT

Transaction ID: SB29.85528

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	8

Mailing Address 7513 E ARLINGTON RD

City State Zip Code
SCOTTSDALE AZ 85250

Amount of Each Disbursement this Period

400.00

Purpose of Disbursement
STATE/LOCAL CONTRIBUTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

400.00

TOTAL This Period (last page this line number only) ►

3800.00
